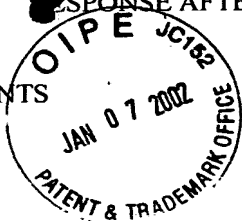


IN THE UNITED STATES PATENT & TRADEMARK OFFICE
RESPONSE AFTER FINAL & NOTICE OF APPEAL

Case Docket No. 6741

Box AF
COMMISSIONER FOR PATENTS
Washington, D.C. 20231



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box AF, Commissioner for Patents, Washington, D.C. 20231, on November 20, 2001

Jason J. Camp 44,582
Name of Attorney/Agent Registration No.
Signature of Attorney or Agent

Dear Sir:

Transmitted herewith is a RESPOSNE AFTER FINAL & NOTICE OF APPEAL for the patent application:

Inventor(s): B. J. ROSELLE et al.

Serial No.: 09/446,202 Group/Art Unit: 1761

Date Filed: December 16, 1999 Examiner: H. Pratt

Title: MICROORGANISM REDUCTION METHODS AND COMPOSITIONS FOR FOOD

RECEIVED

JAN 10 2002

TC 1700

1. ☐ No additional fee is known to be required.
2. ☒ The fee has been calculated as shown below:

| | | |
|-------------------------------------|-----------|-------|
| FEE FOR ONE MONTH EXTENSION OF TIME | \$ 110 | \$110 |
| FEE FOR NOTICE OF APPEAL | + \$320 = | \$320 |
| | TOTAL | \$430 |

3. ☒ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated July 20, 2001 in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$110.00 for a one month extension of time.
4. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
 - a. ☒ Any patent application processing fees under 37 CFR §1.16.
 - b. ☒ Any patent application processing fees under 37 CFR §1.17.
5. The Commissioner is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

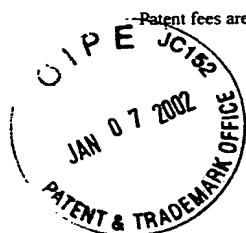
Jason J. Camp
Attorney/Agent for Applicant(s)
Registration No. 44,582
Tel. No. (513) 627-8150

November 20, 2001
Customer No. 27752
K:\JIC6741\TR6741AMDNOA:LSP

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.



Complete if Known

Application Number 09/446,202
 Confirmation Number NOT YET ASSIGNED
 Filing Date December 16, 1999
 First Named Inventor B. J. ROSELLE et al.
 Examiner Name H. Pratt
 Group/Art Unit 1761
 Attorney Docket No. 6741

TOTAL AMOUNT OF PAYMENT (\$ 430.00)

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JAN 10 2002

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-2480

Deposit Account Name The Procter & Gamble Company

☒ Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17

FEE CALCULATION

1. BASIC FILING FEE - Large Entity

| Code (\$) | Fee Description | Fee Paid |
|-----------|------------------------|--------------------------|
| 101 740 | Utility filing fee | <input type="checkbox"/> |
| 106 330 | Design filing fee | <input type="checkbox"/> |
| 108 740 | Reissue filing fee | <input type="checkbox"/> |
| 114 160 | Provisional filing fee | <input type="checkbox"/> |

SUBTOTAL (1) (\$)[0]

2. EXTRA CLAIM FEES - Large Entity

| | Extra Claims | Fee from Below | Fee Paid |
|--------------------|--|----------------------------|--------------------------|
| Total Claims | <input type="checkbox"/> - 20** = <input type="checkbox"/> x | <input type="checkbox"/> = | <input type="checkbox"/> |
| Independent Claims | <input type="checkbox"/> - 3** = <input type="checkbox"/> x | <input type="checkbox"/> = | <input type="checkbox"/> |
| Multiple Dependent | | <input type="checkbox"/> = | <input type="checkbox"/> |

** or number previously paid, if greater; For Reissues, see below

| Code (\$) | Fee Description |
|-----------|---|
| 103 18 | Claims in excess of 20 |
| 102 84 | Independent claims in excess of 3 |
| 104 280 | Multiple dependent claim, if not paid |
| 109 84 | **Reissue independent claims over original patent |
| 110 18 | **Reissue claims in excess of 20 & over original patent |

SUBTOTAL (2) (\$)[0]

FEE CALCULATION (continued)

3. ADDITIONAL FEES

TC 1700

| Code (\$) | Fee Description | Fee Paid |
|------------|---|--------------------------|
| 105 130 | Surcharge-late filing fee or oath | <input type="checkbox"/> |
| 127 50 | Surcharge-late provisional filing fee or cover sheet | <input type="checkbox"/> |
| 139 130 | Non-English specification | <input type="checkbox"/> |
| 147 2,520 | For filing a request for <i>ex parte</i> reexamination | <input type="checkbox"/> |
| 112 920* | Requesting publication of SIR prior to Examiner's action | <input type="checkbox"/> |
| 113 1,840* | Requesting publication of SIR after Examiner's action | <input type="checkbox"/> |
| 115 110 | Extension for reply within 1 st month | [110] |
| 116 400 | Extension for reply within 2 nd month | <input type="checkbox"/> |
| 117 920 | Extension for reply within 3 rd month | <input type="checkbox"/> |
| 118 1,440 | Extension for reply within 4 th month | <input type="checkbox"/> |
| 128 1,960 | Extension for reply within 5 th month | <input type="checkbox"/> |
| 119 320 | Notice of Appeal | [320] |
| 120 320 | Filing a brief in support of an appeal | <input type="checkbox"/> |
| 121 280 | Request for oral hearing | <input type="checkbox"/> |
| 138 1,510 | Petition to institute a public use proceeding | <input type="checkbox"/> |
| 140 110 | Petition to revive - unavoidable | <input type="checkbox"/> |
| 141 1,280 | Petition to revive - unintentional | <input type="checkbox"/> |
| 142 1,280 | Utility issue fee (or reissue) | <input type="checkbox"/> |
| 143 460 | Design issue fee | <input type="checkbox"/> |
| 122 130 | Petitions to the Commissioner | <input type="checkbox"/> |
| 123 50 | Petitions related to provisional applications | <input type="checkbox"/> |
| 126 180 | Submission of Information Disclosure Statement | <input type="checkbox"/> |
| 146 740 | Filing a submission after final rejection (37 CFR § 1.129(a)) | <input type="checkbox"/> |
| 149 740 | For each additional invention to be examined (37 CFR § 1.129(b)) | <input type="checkbox"/> |
| 179 740 | Request for Continued Examination (RCE) | <input type="checkbox"/> |
| 169 900 | Request for expedited examination of a design application | <input type="checkbox"/> |
| 091 1280 | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> |
| | Other fee (specify) _____ | <input type="checkbox"/> |
| | Other fee (specify) _____ | <input type="checkbox"/> |

* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) [430]

SUBMITTED BY

Name (Print/Type) Jason J. Camp

Registration No. 44,582
(Attorney/Agent)

Signature

[Signature]

Complete (if applicable)

Telephone (513) 627-8150

Date November 20, 2001

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
 Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, D.C. 20231.